

# MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO. 101642509  
APPLICANT(S)

FILED DATE

AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS	
IND	DEP	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.							
TOTAL DEP.							
TOTAL CLAIMS							

  

AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS	
IND	DEP	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.							
TOTAL DEP.							
TOTAL CLAIMS							